	_	$\overline{}$	PART B-	FEE(S) TRAN	SMITTAL 🖰	~		
CED ()	Complete and send thi		applicable fee((s), to: Mail	Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000			
97ENIZ -	INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FRE (if required). Blocks I through 4 should be including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence adpress; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A state of the corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence and the corre							
181	CURRENT CORRESPONDENCE ADDRESS (Nove: Legibly mark-up with any corrections or use Block I) 7590 06/23/2004 Maryam Bani Jamali Schlumberger Technology Corporation 110 Schlumberger Drive MD1 Sugar Land, TX 77478				papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUB FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.			
					Pushpa Mohan (Depositor's name)			
					Alimber (Signature		(Signature)	
						Bopt 9	250 4 (Date)	
		TO DATE	F	IRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	APPLICATION NO.	APPLICATION NO. FILING DATE FIRST NAMED				57.0272PCT	6188	
	09/646,715 TITLE OF INVENTION: H	11/16/2000 YDROPHOBICALLY MOI	DIFIED POLYMER			TOTAL FEE(S) DUE	DATE DUE	
	APPLN. TYPE	SMALL ENTITY	issué fe	E P	UBLICATION FEE		09/23/2004	
	nonprovisional	МО	\$1330		\$300 Lass-Subclass	\$1630 7	<i>Q3/12.3/12</i> 004	
	EXAN	EXAMINER		ART UNIT				
	LIPMAN	BERNARD	1713		507-221000			
	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) anached. 1. The Address form PTO/SB/122) anached. 2. Robin Nava agents of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 1. Stephen Schlathe names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 1. Printing on the patent attorneys or agents attorney or agents of up to 2 registered attorney or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 2. Robin Nava agents of the name of a single from the names of up to 2 registered attorney or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 2. Robin Nava agents of the name of up to 2 registered attorney or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 4. Printed on the patent attorney or agents attorney or agents are described attorney or agents. If no name is listed, no name attorney or agents. If no name is listed, no name attorney or agents of up to 2 registered attorney or agents. If no name is listed, no name attorney or agents. If no name is listed, no name attorney or agents. If no name is listed, no name attorney or agents. If no name is listed, no name attorney or agents. If no name is l							
	40 The following fee(s) ar	4a. The following fee(s) are enclosed: O A check in the amount of the fee(s) is enclosed.						
	Issuc Fee							
	☐ Payment by credit card. Form PTO-2038 is attached. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ Payblication Fee ☐ Payment by credit card. Form PTO-2038 is attached. ☐ Payblication Fee							
	☐ Advance Order = # 0	Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.						
	Director for Patents is requ	uested to apply the Issue Fee	and Publication Fo	e (if any) or to re-ap	ply any previously pai	d issue fee to the application	Identified above.	
	(and a fined Claresture)	111111	(Date)	_ 1 _ 1 .			·	
	- Idst	NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from other than the applicant, a registered attorney or agent; or the assigned of other potentials as shown by the records of the United States Parent and Trademark Office.						
	omer than me appaced	E a logaritation	Tendom	AND CITTODE	11 00700790	04 JADDO2 00000023	190615 09646715	
	obtain of retain a beneficial application. Confidence estimated to take 12 m completed application case. Any comments suggestions for reducin Parent and Trademan 22313-1450. DO NOT SEND TO: Commission	mation is required by 37 Cife by the public which is the hit is governed by 35 U.S.C. inutes to complete, including form to the USPTO. Time on the amount of time you this burden, should be set Office. U.S. Department of SEND FEES OR COMP. Der or Patents, Alexandria.	o the (and by the C., 122 and 37 CFR I; gathering, preparis will vary depending used to compute to the Chief Infection of Commerce, LETED FORMS 1 Virginia 22313-1450	1,14. This collection in 1,14. This collection in 1, and submitting tg upon the individuate this form and ormation Officer, U Alexandria, Virgito THIS ADDRES	an is 01 FC:15 he 02 FC:15 or S.	1330.00 DA 04 300.00 DA		
		0.4005	oro mem	uited to respond to	I M. I			

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)

PTOLES (Rev 11/03) Approved for use through 04/30/2004.

OMB 0651-0033 U.S. Pauent and Trademark Office; U.S. DEPARTMENT OF COMMERCE